

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

Jazz PAC

ADDRESS (number and street)

700 13th Street, NW Suite 600

☒Check if different  
than previously  
reported. (ACC)

Washington

DC

20005

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00405290

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report (Q1)☐July 15  
Quarterly Report (Q2)☐October 15  
Quarterly Report (Q3)☐January 31  
Quarterly Report (YE)☐July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☒

Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

11

23

2010

through

12

31

2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Norma Jane Sabiston

Signature of Treasurer

Electronically Filed by Norma Jane Sabiston

Date

01

31

2011

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

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Write or Type Committee Name  
Jazz PAC

Report Covering the Period:

From:

M	M
1	1

D	D
2	3

Y	Y	Y	Y
2	0	1	0

To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2010	35491.39
(b) Cash on Hand at Beginning of Reporting Period .....	8338.62	
(c) Total Receipts (from Line 19) .....	18600.00	177822.96
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	26938.62	213314.35
7. Total Disbursements (from Line 31) .....	20252.33	206628.06
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	6686.29	6686.29
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name

Jazz PAC

Report Covering the Period:

From:

M	M
1	1

D	D
2	3

Y	Y	Y	Y
2	0	1	0

To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	8500.00	19000.00
(ii) Unitemized .....	600.00	600.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	9100.00	19600.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	9500.00	132000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	18600.00	151600.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	26222.96
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	18600.00	177822.96
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	18600.00	177822.96

## DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	15252.33	59128.06	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	15252.33	59128.06	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	130500.00	
24. Independent Expenditure (use Schedule E) .....	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs) .....	0.00	5000.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	5000.00	
29. Other Disbursements.....	0.00	12000.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share .....	0.00	0.00	
(ii) "Levin" Share .....	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	20252.33	206628.06	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	20252.33	206628.06	

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	18600.00	151600.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	5000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	18600.00	146600.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	15252.33	59128.06
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	15252.33	59128.06

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 / 14

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Jazz PAC

**A.**

Full Name (Last, First, Middle Initial)

Norma Jane Sabiston

Mailing Address 1122 Philip Street

City

New Orleans

State

LA

Zip Code

70130

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Sabiston Consultants

Occupation  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 1 / 2 0 1 0

Transaction ID: C728

Amount of Each Receipt this Period

2000.00

**B.**

Full Name (Last, First, Middle Initial)

Ronald L. Platt

Mailing Address 1050 Connecticut Avenue, NW  
Suite 1200

City

Washington

State

DC

Zip Code

20036-5317

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
McGuire Woods Consulting

Occupation  
Senior Advisor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 1 / 2 0 1 0

Transaction ID: C724

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Lesslee F. Mitchell

Mailing Address P.O. Box 1062

City

Mandeville

State

LA

Zip Code

70470-1062

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Saintsations

Occupation  
Coordinator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 0 / 2 0 1 0

Transaction ID: C708

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

4000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 14

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Jazz PAC

**A.**

Full Name (Last, First, Middle Initial)

Melinda M. Maxfield

Mailing Address 8947 Donna Lu Drive

City

Odessa

State

FL

Zip Code

33556

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Williams & Jensen, PLLC

Occupation  
Principal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 1 0 / 2 0 1 0

Transaction ID: C710

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Cherry F. May

Mailing Address 416 Worth Avenue

City

Lafayette

State

LA

Zip Code

70508

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Independent Weekly

Occupation  
Publisher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 2 9 / 2 0 1 0

Transaction ID: C702

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Susie Morgan

Mailing Address 1504 Arabella Street

City

New Orleans

State

LA

Zip Code

70115

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Phelps Dunbar

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 2 9 / 2 0 1 0

Transaction ID: C698

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

1500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 14

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Jazz PAC

**A.**

Full Name (Last, First, Middle Initial)

Donna L. Brazile

Mailing Address 237 Dale Avenue

City

Gretna

State

LA

Zip Code

70056

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Brazile & Associates

Occupation

Media Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 1 1 / 2 0 1 0

Transaction ID: C726

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Joni Friedmann

Mailing Address 702 N. Carrollton Avenue

City

New Orleans

State

LA

Zip Code

70119

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Home Health

Occupation

Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 1 1 / 2 0 1 0

Transaction ID: C731

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Jean N. Coleman

Mailing Address 403 Baronne Street

City

New Orlean

State

LA

Zip Code

70112

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation

Dentist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 2 9 / 2 0 1 0

Transaction ID: C704

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

1750.00

**TOTAL** This Period (last page this line number only) .....



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 14

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Jazz PAC

**A.**

Full Name (Last, First, Middle Initial)

Kathryn Ashworth

Mailing Address 1015 West St. Mary Street

City

Lafayette

State

LA

Zip Code

70506-3420

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation

Real Estate

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	9	/	2	0	1	0

Transaction ID: C700

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

A. Melissa Maxfield

Mailing Address 8947 Donna Lou Drive

City

Odessa

State

FL

Zip Code

33556-1908

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Comcast

Occupation

Vice President Government Affairs

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	1	/	2	0	1	0

Transaction ID: C735

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional) .....

1250.00

TOTAL This Period (last page this line number only) .....

8500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 14

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Jazz PAC

**A.**

Full Name (Last, First, Middle Initial)

Goldman Sachs Group, Inc. PAC

Mailing Address 101 Constitution Avenue, NW  
Suite 1000E

City State Zip Code  
Washington DC 20001

FEC ID number of contributing  
federal political committee.

**C** C00350744

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 1 1 / 2 0 1 0

Transaction ID: C737

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)

General Electric Company PAC

Mailing Address 1299 Pennsylvania Avenue, NW  
Suite 900 West

City State Zip Code  
Washington DC 20004

FEC ID number of contributing  
federal political committee.

**C** C00024869

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 2 2 / 2 0 1 0

Transaction ID: C739

Amount of Each Receipt this Period

2500.00

**C.**

Full Name (Last, First, Middle Initial)

TargetCitizens Political Forum

Mailing Address 1000 Nicollet Mall  
TPS 3275

City State Zip Code  
Minneapolis MN 55403

FEC ID number of contributing  
federal political committee.

**C** C00098061

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 2 2 / 2 0 1 0

Transaction ID: C744

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

8500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 14

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Jazz PAC

**A.**

Full Name (Last, First, Middle Initial)

UnitedHealth Group Inc. PAC

Mailing Address 9900 Bren Road East

City

Minnetonka

State

MN

Zip Code

55343

FEC ID number of contributing  
federal political committee.

**C**

C00274431

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 2 2 / 2 0 1 0

Transaction ID: C741

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

1000.00

**TOTAL** This Period (last page this line number only) .....

9500.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 12 / 14

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Jazz PAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Campaign Finance Consultants</p> <hr/> <p>Mailing Address 10 G Street, NE Suite 470</p> <hr/> <p>City Washington State DC Zip Code 20002</p> <hr/> <p>Purpose of Disbursement Fundraising Consulting Services</p> <hr/> <p>Candidate Name</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D872</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <hr/> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3106.39"/></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Perkins Coie, LLP</p> <hr/> <p>Mailing Address 700 13th Street, NW Suite 600</p> <hr/> <p>City Washington State DC Zip Code 20005</p> <hr/> <p>Purpose of Disbursement Legal &amp; Accounting Services</p> <hr/> <p>Candidate Name</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D884</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <hr/> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="6119.21"/></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) AMG Public Relations</p> <hr/> <p>Mailing Address 833 St. Louis Street</p> <hr/> <p>City LaFayette State LA Zip Code 70506</p> <hr/> <p>Purpose of Disbursement Printing</p> <hr/> <p>Candidate Name</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D876</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <hr/> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="234.94"/></p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**9460.54**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 13 / 14

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Jazz PAC

**A.**

Full Name (Last, First, Middle Initial)  
John B. Cruz

Mailing Address 8326 Spruce Street

City State Zip Code  
New Orleans LA 70118

Purpose of Disbursement  
Event Entertainment

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D888

Date of Disbursement

/   /

Amount of Each Disbursement this Period

450.00

**B.**

Full Name (Last, First, Middle Initial)  
Arnaud's Restaurant

Mailing Address 813 Bienville Street

City State Zip Code  
New Orleans LA 70112

Purpose of Disbursement  
Catering

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D874

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5190.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5640.00

**TOTAL** This Period (last page this line number only) .....

15100.54

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 14 / 14

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Jazz PAC

**A.**

Full Name (Last, First, Middle Initial)  
Klobuchar For Minnesota

Mailing Address P.O. Box 4146

City State Zip Code  
St. Paul MN 55104

Purpose of Disbursement  
Contribution

Candidate Name  
Amy J. Klobuchar

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MN District:

**Transaction ID:** D882

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

**B.**

Full Name (Last, First, Middle Initial)  
Whitehouse for Senate

Mailing Address P.O. Box 40280

City State Zip Code  
Providence RI 02940

Purpose of Disbursement  
Contribution

Candidate Name  
Sheldon Whitehouse

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: RI District:

**Transaction ID:** D879

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5000.00

**TOTAL** This Period (last page this line number only) .....

5000.00